## 24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

Schedule E)		FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)  Collifornium of for Innovention		
Californians for Innovation		C C00566679
	_	
Check if 24-hour report		
Full Name of Payee  Cornerstone Printing Inc.  Date of Public Distribution/Disseminate		
		10 24 2016
Mailing Address 50 Francisco St		unt
City State Zip Code		38823.30
San Francisco CA 941		saction ID : VQZN3AAY746 of Disbursement or Obligation
Purpose of Expenditure Mailer  Ca	ategory/ Type 004	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate	Support Office Soug	ght: X House District: 17
Honda, Mike, , ,	X Oppose Presi	dent Senate State: CA
Calendar Year-To-Date Per Election for Office Sought	Disburseme 2016	ent For: Primary <b>X</b> General Other (specify) ▶
Full Name of Payee		e of Public Distribution/Dissemination
Cornerstone Printing Inc.		M M / D D / Y Y Y Y Y Y 1 Y 1 Y 1 Y 1 Y 1 Y 1 Y 1
Mailing Address 50 Francisco St	Amo	
City State Zip	Code	25822.21
San Francisco CA 94		saction ID : VQZN3AAY754 e of Disbursement or Obligation
Purpose of Expenditure Postage  Ca	ategory/ Type 004	10 / 24 / 2016
Name of Federal Candidate	Support Office Soug	ght: X House District: 17
Honda, Mike, , ,	X Oppose Presi	dent Senate State: CA
Calendar Year-To-Date Per Election for Office Sought	Disburseme 2016	ent For: Primary <b>X</b> General Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures	······	64645.51
(b) SUBTOTAL of Unitemized Independent Expenditures		
(c) TOTAL Independent Expenditures	······	64645.51
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.		
Chopra, Ash, , ,  [Electronically Filed] Date 10 25 2016		
Signature		